

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF NEW YORK

David Carter
Pro SE

Plaintiff,

[Insert full name of plaintiff/prisoner]

16CV1187

CIVIL RIGHTS COMPLAINT
42 U.S.C. § 1983

JURY DEMAND

YES ☒ NO ☐

-against-

New York City
Correction Officer
Taveras (Shield #7037)
male hispanic
who worked 7-3 tour
@ A.M.K.C. Visit counsel office

Defendant(s).

[Insert full name(s) of defendant(s). If you need additional space, please write "see attached" and insert a separate page with the full names of the additional defendants. The names listed above must be identical to those listed in Part I]

- I. **Parties:** (In item A below, place your name in the first blank and provide your present address and telephone number. Do the same for additional plaintiffs, if any.)

A. Name of plaintiff

David Carter

If you are incarcerated, provide the name of the facility and address:

G.R.V.C. (Beacon)
Rikers Island
09-09 Hazen St.

Prisoner ID Number:

349-16-00020

If you are not incarcerated, provide your current address:

Telephone Number:

~~_____~~
~~_____~~
~~_____~~
252-723-4706

B. List all defendants. You must provide the full names of each defendant and the addresses at which each defendant may be served. The defendants listed here must match the defendants named in the caption on page 1.

Defendant No. 1

N.Y.C. Correction Officer
Full Name TAVERAS # [Sheild] 7037
Job Title New York City Corr. Officer
A.M.K.C. Rikers Island
Address 18-18 HAZEN ST
East Elmhurst NY 11370

Defendant No. 2

Full Name _____
Job Title _____
Address _____

Defendant No. 3

Full Name _____
Job Title _____

Defendant No. 4

Address

Full Name

Job Title

Address

Defendant No. 5

Full Name

Job Title

Address

II. Statement of Claim:

(State briefly and concisely, the facts of your case. Include the date(s) of the event(s) alleged as well as the location where the events occurred. Include the names of each defendant and state how each person named was involved in the event you are claiming violated your rights. You need not give any legal arguments or cite to cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. You may use additional 8 ½ by 11 sheets of paper as necessary.)

Where did the events giving rise to your claim(s) occur?

a Inmate
Counsel visit room @ A.M. KC.
C71-C95 Rikers Island

When did the events happen? (include approximate time and date)

January 14th 2016 during
7-3 tour approximately 10:45
AM

Facts: (what happened?)

ON January 14th 2016
 male hispanic New York City
 correction officer who is
 identified as Mr. Taveras
 Shield # 7037 I deliberately
 assaulted my person literally
 2 seconds after being attacked
 and as well assaulted by
 an inmate who came from
 the blind side of me
 with no particular warning
 or prior verbal altercation.
 Officer Taveras who witnessed
 this particular attack
 allowed other inmate to harm
 me, and grabbed me by my
 neck causing injury to my
 thyroid gland and proceeded to
 trip me off my feet with his
 legs.

II.A. Injuries. If you are claiming injuries as a result of the events you are complaining about, describe your injuries and state what medical treatment you required. Was medical treatment received?

pain and swelling
 to neck area and
 traumatized severely
 due to being assaulted
 immediately after being
 assaulted and shock and
 traumatized by being caught
 off guard by blows to head
 area.

III. Relief: State what relief you are seeking if you prevail on your complaint.

I ask respectfully
that I be awarded
10 million dollars for pain,
traumatization, and suffering.
And also a federal memorandum
to enforce sensitivity training
for inmate staff etc.

I declare under penalty of perjury that on January 27th 2016 (date)
complaint to prison authorities at G.R.V.C. - Rikers Island (name of prison)
States District Court for the Southern District of New York

I declare under penalty of perjury that the foregoing is true and correct.

Dated:

January
27th, 2016

Signature of Plaintiff

Mr. David Cortez

Name of Prison Facility or Address if not incarcerated

G.R.V.C. - Rikers Island
09-09 HAZEN ST.
EAST ELMHURST, N.Y.

Address

11370
349-16-00020

Prisoner ID#

N.Y.S.I.D.

rev. 12/1/2015

58 41-77934613486 L

Mr. David Carter # 349-16-00070

G.R.V.C. - Rikers Island

09-09 HAZEN Street

EAST ELmhurst, N.Y. 11370



Pro SE Clerk
United States Dist
500 Pearl Street
New York, N.Y. 10007

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